

PATENT APPLICATION FEE DETERMINATION RECORD  
Effective October 1, 2001

Application or Docket Number  
101052, 185  
19341

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

|                                  |                          |              |
|----------------------------------|--------------------------|--------------|
| TOTAL CLAIMS                     | 8                        |              |
| FOR                              | NUMBER FILED             | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS          | 6 minus 20 =             | *            |
| INDEPENDENT CLAIMS               | 2 minus 3 =              | *            |
| MULTIPLE DEPENDENT CLAIM PRESENT | <input type="checkbox"/> |              |

- If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

| AMENDMENT A                                    | CLAIMS REMAINING AFTER AMENDMENT | MINUS | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|----------------------------------|-------|------------------------------------|---------------|
|  |                                  |       | **                                 | =             |
| Total  | • 12                             | Minus | ** 20                              | = —           |
| Independent                                    | • 2                              | Minus | ** 3                               | = —           |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | <input type="checkbox"/>         |       |                                    |               |

SMALL ENTITY TYPE  OR OTHER THAN SMALL ENTITY

|           |        |              |        |
|-----------|--------|--------------|--------|
| RATE      | FEES   | RATE         | FEES   |
| BASIC FEE | 370.00 | OR BASIC FEE | 740.00 |
| X\$ 9=    |        | OR X\$18=    |        |
| X42=      |        | OR X84=      |        |
| +140=     |        | OR +280=     |        |
| TOTAL     |        | OR TOTAL     | 740    |

OTHER THAN SMALL ENTITY

|                  |                |                     |                |
|------------------|----------------|---------------------|----------------|
| RATE             | ADDITIONAL FEE | RATE                | ADDITIONAL FEE |
| X\$ 9=           |                | OR X\$18=           |                |
| X42=             |                | OR X84=             |                |
| +140=            |                | OR +280=            |                |
| TOTAL ADDIT. FEE |                | OR TOTAL ADDIT. FEE |                |

(Column 1) (Column 2) (Column 3)

| AMENDMENT B                                    | CLAIMS REMAINING AFTER AMENDMENT | MINUS | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|----------------------------------|-------|------------------------------------|---------------|
|  |                                  |       | **                                 | =             |
| Total  | • 10                             | Minus | ** 20                              | = —           |
| Independent                                    | • 2                              | Minus | ** 3                               | = —           |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | <input type="checkbox"/>         |       |                                    |               |

|                  |                |                     |                |
|------------------|----------------|---------------------|----------------|
| RATE             | ADDITIONAL FEE | RATE                | ADDITIONAL FEE |
| X\$ 9=           |                | OR X\$18=           |                |
| X42=             |                | OR X84=             |                |
| +140=            |                | OR +280=            |                |
| TOTAL ADDIT. FEE |                | OR TOTAL ADDIT. FEE |                |

(Column 1) (Column 2) (Column 3)

| AMENDMENT C                                    | CLAIMS REMAINING AFTER AMENDMENT | MINUS | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|----------------------------------|-------|------------------------------------|---------------|
|  |                                  |       | **                                 | =             |
| Total  | • 6                              | Minus | ** 20                              | =             |
| Independent                                    | • 1                              | Minus | ** 3                               | =             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | <input type="checkbox"/>         |       |                                    |               |

|                  |                |                     |                |
|------------------|----------------|---------------------|----------------|
| RATE             | ADDITIONAL FEE | RATE                | ADDITIONAL FEE |
| X\$ 9=           |                | OR X\$18=           |                |
| X42=             |                | OR X84=             |                |
| +140=            |                | OR +280=            |                |
| TOTAL ADDIT. FEE |                | OR TOTAL ADDIT. FEE |                |

- If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.